			R WELL RECORD	Form WWC-	5 KSA 82	2a-1212	
LOCATION OF		Fraction	(5 / 5	→ [ction Numbe	1 /2	
County: Ch		W W/4		within city?		<u> </u>	SIR 7 (EM)
	ction from gearest tove 25 th 3/4 No		Idress of well if located	within City?			
	OWNER: Bil						
RR#, St. Address						Roard of Agricul	ture, Divisjon of Water Resources
City State 7ID C	ada · e tiv	ONC CITI	153. 6686°	7		Application Num	har: 1/1
City, State, ZIF C	'S LOCATION WITH	A DERTH OF C	OMPLETED WELL	127	# ELEV	ATION:	Dei. / V P-
AN "X" IN SEC	TION BOX:	Depth of Co	votor Englishment	1.0.1.	40 "	2 / 2 2	. ft. 3
-		Deptit(s) Glound	valer Encountered 1.	٠	æ .™ It.		ay/yr 11-11-88
1 i							rs pumping gpm
NW	NE						rs pumping gpm
			- ine		→		in. toft.
₩ 	E		_	5 Public water			
- i	i	(1)Domestic				_	12 Other (Specify below)
SW	SE ₂	2 Irrigation	4 Industrial	7 Lawn and	garden only	10 Monitoring well	·····
							If yes, mo/day/yr sample was sub-
1		mitted	p		-	/ater Well Disinfected? You	• • • •
TYPE OF BLA	NK CASING USED:		5 Wrought iron	8 Concr			Glued Clamped
1 Steel	3 RMP (S	R)	6 Asbestos-Cement		(specify bel		Welded
2 PVC	4 ABS		7 Fiberglass			•	Threaded
	<i>p</i>) .	.in. to	ft Dia				in. to ft.
Casing height abo	ove land surface	18	in., weight		lbs	s./ft. Wall thickness or gau	ige No. 160
	N OR PERFORATIO		,	(7)PV		10 Asbestos	
1 Steel	3 Stainles	s steel	5 Fiberglass	_	/IP (SR)	11 Other (sp	ecify)
2 Brass	4 Galvaniz	ed steel	6 Concrete tile	9 AE		• •	ed (open hole)
SCREEN OR PER	REPORATION OPENIN	IGS ARE:	5 Gauze	d wrapped		8 Saw cut	11 None (open hole)
1 Continuou	s slot ③M	lill slot	6 Wire v	vrapped		9 Drilled holes	,
2 Louvered		ey punched	7 Torch	cut .	1	10 Other (specify)	
SCREEN-PERFO	RATED INTERVALS:		7. / ft. to		ft., Fr	om	. ft. to
		From	ft. to		ft., Fr	rom	. ft. toft.
GRAVEL	PACK INTERVALS:	From	ft. to		ft., Fr	om	. ft. toft.
•		From	ft. to		ft., Fr	om	ft. to ft.
GROUT MATE			2 Cement grout	3 Bento			
Grout Intervals:	From	.ft. to <i>l . E</i>	ft., From	ft.	to	ft., From	ft. toft.
_	st source of possible					•	14 Abandoned water well
①Septic tan	k 4 Latei	al lines	7 Pit privy		11 Fue	el storage	15 Oil well/Gas well
2 Sewer line		•	8 Sewage lago	on	12 Fer	tilizer storage	16 Other (specify below)
_	sewer lines 6 Seep	page pit	9 Feedyard		13 Inse	ecticide storage	
Direction from we		East Po				any feet? 300	
FROM TO	10	LITHOLOGIC L	_OG	FROM	TO		ING INTERVALS
0 /	1/3.			1//	124	Gray Lime	H20 150pm
14 9	75 101			124	127	54. Gray.	
4 8		ute	« / .	-	ļ	11/1 4.	1-
70 2 7 5		n Lime +	ond 12			WITTE	5 Field Tests
23 23	- 44 14	LIME L& Green				SUPERTE 6	5 // / / / / / / / / / / / / / / / / /
25 30	7 6411			 		Clorice /	v 7/
30 4	JAVER	./ •	Boxwork.	 		1	
4/1 40	Pense	Lime	1-1-7-11-	:b		Water 340	ws Carbonation.
70127	Broken	Cotton on	hale Took Flu	/ Q	 		
27 50	2 Lime			-		Shalz Ca	tahen
73 6	3 Broxer		ole 14 GPM	+		110'	, , , , , ,
03 1/2		c Shale	1 nouse	+	 	110	
1/3/1/4		Brown Med		_			
_1/4 // /	Gray S	haley Lim	<i>5</i>	+	-		
				—	<u> </u>	<u> </u>	
7 CONTRACTO	R'S OR LANDOWNE	R'S CERTIFICATION	ON: This water well wa	ıs (1) constru			d under my jurisdiction and was
	o/day/year)	1.7.7.8.8.					my knowledge and belief. Kansas
	actor's License No	203		ell Record wa		d on (mo/day/yr)	0
	s name of Ma Na				by (sign		
INSTRUCTIONS:	Use typewriter or ball point	pen. PLEASE PRESS F	IRMLY and PRINT clearly. Ple	ase fill in blanks,	underline or circ	cie the correct answers. Send top	three copies to Kansas Department
of Health and En	vironment, Bureau of Water	Protection, Topeka, Kan	isas 66620-7320. Felephone: 9	#13-296-5514. Se	nia one to WAT	ER WELL OWNER and retain one	e for your records.